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Bib Data Sheet

CONFIRMATION NO. 5571

<b>SERIAL NUMBER</b> 10/748,185	<b>FILING OR 371(c) DATE</b> 12/31/2003 <b>RULE</b>	<b>CLASS</b> 514	<b>GROUP ART UNIT</b> 1614	<b>ATTORNEY DOCKET NO.</b> A-8636
<b>APPLICANTS</b> George M. Halow, El Paso, TX;				
<b>** CONTINUING DATA *****</b>				
<b>** FOREIGN APPLICATIONS *****</b>				
<b>IF REQUIRED, FOREIGN FILING LICENSE GRANTED **</b> 04/28/2004				
<b>** SMALL ENTITY **</b>				
Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no 35 USC 119 (a-d) conditions met <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after Allowance Verified and Acknowledged <input type="checkbox"/> yes <input checked="" type="checkbox"/> no		<b>STATE OR COUNTRY</b> TX	<b>SHEETS DRAWING</b> 0	<b>TOTAL CLAIMS</b> 25
Examiner's Signature <i>[Signature]</i> Initials <i>[Initials]</i>		<b>INDEPENDENT CLAIMS</b> 3		
<b>ADDRESS</b> Jean A. Buttmi, Esq. HOFFMAN, WASSON & GITLER, PC Suite 522 2461 South Clark Street Arlington, VA22202				
<b>TITLE</b> Composition and method for treatment of hepatic encephalopathy				
<b>FILING FEE RECEIVED</b> 705	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:		<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees ( Filing ) <input type="checkbox"/> 1.17 Fees ( Processing Ext. of time ) <input type="checkbox"/> 1.18 Fees ( Issue ) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit	